

# FEC FORM 2

## STATEMENT OF CANDIDACY

SECRETARY OF THE SENATE

16 APR 15 PM 2:26

1. (a) Name of Candidate (in full) John Hoeven		
(b) Address (number and street) PO BOX 881		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code BISMARCK ND 58502		2. Candidate's FEC Identification Number S0ND00093
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought Senate	3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
6. State & District of Candidate ND		

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 election(s).  
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) HOEVEN FOR SENATE		
(b) Address (number and street) PO BOX 881		
(c) City, State, and ZIP Code BISMARCK ND 58502		

### DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) FRIENDS OF JOHN HOEVEN		
(b) Address (number and street) PO BOX 3206		
(c) City, State, and ZIP Code BISMARCK ND 58502		

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate 	Date 04/15/2016
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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# FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

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## DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ ADDITIONAL ]

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

HOEVEN VICTORY COMMITTEE

(b) Address (number and street)

228 S WASHINGTON ST STE 115

(c) City, State and ZIP Code

ALEXANDRIA

VA

22314

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ ADDITIONAL ]

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

GOOD NEIGHBOR COMMITTEE

(b) Address (number and street)

228 S WASHINGTON ST STE 115

(c) City, State and ZIP Code

ALEXANDRIA

VA

22314

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ ADDITIONAL ]

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

2016 SENATORS CLASSIC COMMITTEE

(b) Address (number and street)

228 S WASHINGTON ST STE 115

(c) City, State and ZIP Code

ALEXANDRIA

VA

22314

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# Hand Delivered

201604150200106375

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

ELECTRONICALLY DELIVERED

Date of Receipt

HAND DELIVERED

Date of Receipt

4-15-16

USPS FIRST CLASS MAIL

Date of Receipt

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USPS REGISTERED/CERTIFIED

Postmark

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DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

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USPS EXPRESS MAIL

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## OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS

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UPS

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RECEIVED FROM FEDERAL ELECTION COMMISSION

Date of Receipt

POSTMARK ILLEGIBLE

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NO POSTMARK

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FAX

Date of Receipt

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Date of Receipt or Postmark

PREPARER

DH

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4-15-16

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